OTAL CLAIMS  OR  OTAL CHARGEAE  DEPENDENT CLA  ULTIPLE DEPEND  If the difference in	AIMS DENT CLAIM P	(Cotum)  NUMBER  NUMBER  () S mi	n 1) FILEO nus 20= ninus 3 =	(Colu	mn 2) ER EXTRA	SMALL TYPE RATE BASIC F	EE 375.00	OR OR OR	OTHER SMALL RATE BASIC FEE X\$18=	
OR OTAL CHARGEAB DEPENDENT CLA ULTIPLE DEPEND If the difference in	DENT CLAIM P	MESENT	nus 20= inus 3 =	NUMB	PER EXTRA	BASIC F	EE 375.00	1	BASIC FEE	750.00
DTAL CHARGEAE DEPENDENT CLA ULTIPLE DEPEND  The difference in	DENT CLAIM P	MESENT	nus 20= inus 3 =	NUMB	ER EXTRA			1		
DEPENDENT CLAU ULTIPLE DEPEND The difference in	DENT CLAIM P	∫ Ó m RESENT	inus 3 =	.88	7	X\$ 9		1		1584
ULTIPLE DEPEND If the difference in	DENT CLAIM P	∫ Ó m RESENT	inus 3 =		7			$\dashv$ $^{}$		
if the difference in	n column 1 is		ero color			X42z			X84=	588
2/ w/de CL		less than z	ere enter					OR		200
HW/06 CL				"O" in c	rolumn 2	+140		OR	+280=	-4
214/06	A CA CRIP	MENDE			Oldfrin &	TOTA	L	OR	TOTAL	292
	(Column 1)	MENDE	Colum (Colum		(Column 3)	SMAL	L ENTITY	OR	OTHER SMALL:	
	CLAIMS REMAINING AFTER		HIGH NUMI PREVIO	EST BER DUSLY	PRESENT EXTRA	RATE			RATE	ADDI- TIONAL
Total	AMENDMENT / / / / /	Minus	PAID I	POR つい	<del>.                                    </del>	X\$ 9=	FEE		X\$18=	FEE
Independent	6	Minus	,	<del>}</del>	-	X42=		OR	X84=	
FIRST PRESEN	STATION OF MI	ULTIPLE DE	PENDENT	CLAIM		A42=		OR	A84≈	
1 1						+140=	•	OR	+280=	
MALLA						ADDIT. FE		OR	TOTAL ADOIT. FEE	
1110	(Column 1) CLAIMS		(Colum		(Column 3)	-		•		
	REMAINING AFTER AMENOMENT		PREVIO PAID I	BER	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total .	·	Minus	-//	<u> </u>	9	X\$ 9=		OR	X\$18=	
Independent	$\cdot \cdot \rho^{\nu}$	Minus	*** /	4	-	X42=	1	OR	X84=	
FIRST PRESEN	TATION OF ME		PENDENT	CLAIM	لىلا	+140=		1	+280=	
` .						101/		OR	TOTAL	
•	(Column 1)					ADDIT. FE		JOR	ADDIT FEE	
	CLAIMS		(Colum		(Column 3)		1 :22:	<b>1</b>		
	REMAINING AFTER		NUME PREVIO		PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
Total	AMENDMENT		PAID			-	FEE			FEE
Independent		Minus	**		*	X\$ 9=	<u> </u>	OR	X\$18=	
		Minus	PENDENT	CLAIM		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+140=		OR	+280=	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE								اما	TOTAL ADDIT. FEE	

Application or Docket Number